

All Clinical Quality Measures in the Promoting Interoperability/EHR Incentive Program are referred to as "eQMS" because they must be **generated by** a provider's Certified Electronic Health Record system. Eligible Professionals participating in the Vermont Medicaid PIP/EHRIP are not required to submit eQMs electronically.

The 2019 eQCM reporting period is the full 2019 calendar year. (For EPs attesting to MU for the first time, the 2019 reporting period is any continuous 90-day period within CY 2019.)

Important changes to Program Year 2019 Clinical Quality Measures for the Medicaid Promoting Interoperability Program:

- All participating EPs are required to report on any **six** eQMs relevant to their scope of practice from the set of 50 available.
- In addition, EPs must report on at least **one outcome measure**.
- If no outcome measure is relevant to his or her scope of practice, the EP must report on **one high priority measure**.
- If no high priority measures are relevant to their scope of practice, they may report on any six relevant measures.
- **If none of the Outcome or High Priority CQMs are relevant to the EP's scope of practice, they must check the acknowledgement box within each section in order to proceed to the next screen.**

For additional guidance on documenting and reporting data, please contact the Vermont Medicaid PIP/EHRIP Team: [ahs.dvhaEHRIP@vermont.gov](mailto:ahs.dvhaEHRIP@vermont.gov)

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CMS guidance for providers who transitioned EHR systems in 2019 gives further clarification on how providers should report CQMs for the full calendar year:

**Q: How should a provider who upgrades from 2014 Edition CEHRT to 2015 Edition CEHRT, or changes CEHRT vendors, report a full year of eQMs in 2019? For example, provider is using vendor A, a 2014 CEHRT, at the beginning of calendar year 2019. The provider switches to vendor B, a 2015 CEHRT, on April 1, 2019.**

**A:** An EP does not need to have 2015 Edition CEHRT by the beginning of the calendar year (or the eQCM reporting period). The data that Medicaid EPs are required to report for eQMs is a snapshot based on the data within the CEHRT, taken at the time of attestation, for the reporting period.

The provider's 2015 Edition CEHRT should be able to produce eQCM reports for the full year, regardless of when it was implemented, because the data that was in their vendor A CEHRT should be transferred to their vendor B CEHRT. However, if for some reason, they can't, they should report what comes out of their vendor B CEHRT at the time of attestation.

According to CMS rule, 2015 CEHRT does not need to be implemented on January 1, 2019, but the 2015 Edition of CEHRT must be implemented for an EHR reporting period [the reporting period for meaningful use objectives, which is a minimum of 90 days] in calendar year 2019. Therefore, the 2015 CEHRT must be implemented no later than October 3, 2019. You may collect CQM data using an earlier version of CEHRT as late as October 2, 2019 and then report the data combined from both versions. If you do not collect data on the same measures in the two CEHRT versions, you should report only the data from the version with the greatest number of encounters. States may, but are not required to, gather information from providers about which version of the eQCM their CEHRT produces and they are reporting.

The following screenshots from MAPIR illustrate the instructions and selection process for reporting on eQMs for Program Year 2019.

Get Started R&A/Contact Info Eligibility Patient Volumes Attestation Review Submit

### Attestation Meaningful Use Measures

#### Meaningful Use Clinical Quality Measure Worklist

You must select a minimum of six (6) CQMs in order to proceed. CMS now requires that you must select at least one (1) Outcome measure or if no Outcome measures are applicable, at least one (1) High Priority measure. If no Outcome or High Priority CQMs are relevant to your scope of practice, then please choose a minimum of six (6) CQMs from the list of Other available CQMs.

**If none of the Outcome or High Priority CQMs are relevant to your scope of practice, you must check the acknowledgement box within each section in order to proceed to the next screen.**

CQMs below are listed by NQF number within each section. You have the ability to sort and view the CQMs by NQF or CMS number by clicking on the sort arrows below.

*Please note you are not limited to only selecting one Outcome or High Priority CQM, you may select multiple CQMs from any category with a minimum total of six (6). When all CQMs have been edited and you are satisfied with the entries, select "Return to Main" button to access the main attestation topic list.*

#### Outcome Clinical Quality Measures

NQF#	Measure#	Title	Selection
Not Applicable	CMS75 v7.2.000	Children Who Have Dental Decay or Cavities	<input type="checkbox"/>
0059	CMS122 v7.4.000	Diabetes: Hemoglobin A1c (HbA1c) Poor Control (> 9%)	<input type="checkbox"/>
0564	CMS132 v7.2.000	Cataracts: Complications within 30 Days Following Cataract Surgery Requiring Additional Surgical Procedures	<input type="checkbox"/>
0565	CMS133 v7.2.000	Cataracts: 20/40 or Better Visual Acuity within 90 Days Following Cataract Surgery	<input type="checkbox"/>
0710	CMS159 v7.2.000	Depression Remission at Twelve Months	<input type="checkbox"/>
0018	CMS165 v7.3.000	Controlling High Blood Pressure	<input type="checkbox"/>

None of the Outcome Clinical Quality Measures listed above pertain to my scope of practice.

## High Priority Clinical Quality Measures

NQF#	Measure#	Title	Selection
0418	CMS2 v8.1.000	Preventive Care and Screening: Screening for Depression and Follow-Up Plan	<input type="checkbox"/>
Not Applicable	CMS50 v7.1.000	Closing the Referral Loop: Receipt of Specialist Report	<input type="checkbox"/>
Not Applicable	CMS56 v7.4.000	Functional Status Assessment for Total Hip Replacement	<input type="checkbox"/>
Not Applicable	CMS66 v7.5.000	Functional Status Assessment for Total Knee Replacement	<input type="checkbox"/>
0419	CMS68 v8.1.000	Documentation of Current Medications in the Medical Record	<input type="checkbox"/>
Not Applicable	CMS90 v8.3.000	Functional Status Assessments for Congestive Heart Failure	<input type="checkbox"/>
2372	CMS125 v7.2.000	Breast Cancer Screening	<input type="checkbox"/>
0105	CMS128 v7.2.000	Antidepressant Medication Management	<input type="checkbox"/>
0389	CMS129 v8.2.000	Prostate Cancer: Avoidance of Overuse of Bone Scan for Staging Low Risk Prostate Cancer Patients	<input type="checkbox"/>
0034	CMS130 v7.2.000	Colorectal Cancer Screening	<input type="checkbox"/>
0108	CMS136 v8.3.000	Follow-Up Care for Children Prescribed ADHD Medication (ADD)	<input type="checkbox"/>
0004	CMS137 v7.2.000	Initiation and Engagement of Alcohol and Other Drug Dependence Treatment	<input type="checkbox"/>
0028	CMS138 v7.1.000	Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention	<input type="checkbox"/>
0101	CMS139 v7.2.000	Falls: Screening for Future Fall Risk	<input type="checkbox"/>
0089	CMS142 v7.1.000	Diabetic Retinopathy: Communication with the Physician Managing Ongoing Diabetes Care	<input type="checkbox"/>
Not Applicable	CMS146 v7.2.000	Appropriate Testing for Children with Pharyngitis	<input type="checkbox"/>
0041	CMS147 v8.1.000	Preventive Care and Screening: Influenza Immunization	<input type="checkbox"/>
0033	CMS153 v7.4.000	Chlamydia Screening for Women	<input type="checkbox"/>
0069	CMS154 v7.2.000	Appropriate Treatment for Children with Upper Respiratory Infection (URI)	<input type="checkbox"/>
0024	CMS155 v7.2.000	Weight Assessment and Counseling for Nutrition and Physical Activity for Children and Adolescents	<input type="checkbox"/>
0022	CMS156 v7.3.000	Use of High-Risk Medications in the Elderly	<input type="checkbox"/>
0384	CMS157 v7.4.000	Oncology: Medical and Radiation - Pain Intensity Quantified	<input type="checkbox"/>
1365	CMS177 v7.2.000	Child and Adolescent Major Depressive Disorder (MDD): Suicide Risk Assessment	<input type="checkbox"/>
Not Applicable	CMS249 v1.4.000	Appropriate Use of DXA Scans in Women Under 65 Years Who Do Not Meet the Risk Factor Profile for Osteoporotic Fracture	<input type="checkbox"/>

None of the High Priority Clinical Quality Measures listed above pertain to my scope of practice.

Other Clinical Quality Measures

NQF#	Measure#	Title	Selection
0032	CMS124 v7.2.000	Cervical Cancer Screening	<input type="checkbox"/>
0038	CMS117 v7.2.000	Childhood Immunization Status	<input type="checkbox"/>
0055	CMS131 v7.2.000	Diabetes: Eye Exam	<input type="checkbox"/>
0062	CMS134 v7.2.000	Diabetes: Medical Attention for Nephropathy	<input type="checkbox"/>
0070	CMS145 v7.2.000	Coronary Artery Disease (CAD): Beta-Blocker Therapy-Prior Myocardial Infarction (MI) or Left Ventricular Systolic Dysfunction (LVEF <40%)	<input type="checkbox"/>
0081	CMS135 v7.1.000	Heart Failure (HF): Angiotensin-Converting Enzyme (ACE) Inhibitor or Angiotensin Receptor Blocker (ARB) Therapy for Left Ventricular Systolic Dysfunction (LVSD)	<input type="checkbox"/>
0083	CMS144 v7.1.000	Heart Failure (HF): Beta-Blocker Therapy for Left Ventricular Systolic Dysfunction (LVSD)	<input type="checkbox"/>
0086	CMS143 v7.1.000	Primary Open-Angle Glaucoma (POAG): Optic Nerve Evaluation	<input type="checkbox"/>
0104	CMS161 v7.2.000	Adult Major Depressive Disorder (MDD): Suicide Risk Assessment	<input type="checkbox"/>
0405	CMS52 v7.2.000	HIV/AIDS: Pneumocystis Jiroveci Pneumonia (PCP) Prophylaxis	<input type="checkbox"/>
0421	CMS69 v7.1.000	Preventive Care and Screening: Body Mass Index (BMI) Screening and Follow-Up Plan	<input type="checkbox"/>
0712	CMS160 v7.3.000	Depression Utilization of the PHQ-9 Tool	<input type="checkbox"/>
2872	CMS149 v7.3.000	Dementia: Cognitive Assessment	<input type="checkbox"/>
Not Applicable	CMS22 v7.1.000	Preventive Care and Screening: Screening for High Blood Pressure and Follow-Up Documented	<input type="checkbox"/>
Not Applicable	CMS74 v8.2.000	Primary Caries Prevention Intervention as Offered by Primary Care Providers, including Dentists	<input type="checkbox"/>
Not Applicable	CMS82 v6.3.000	Maternal Depression Screening	<input type="checkbox"/>
Not Applicable	CMS127 v7.2.000	Pneumococcal Vaccination Status for Older Adults	<input type="checkbox"/>
Not Applicable	CMS347 v2.1.000	Statin Therapy for the Prevention and Treatment of Cardiovascular Disease	<input type="checkbox"/>
Not Applicable	CMS 645 v2.1.000	Bone density evaluation for patients with prostate cancer and receiving androgen deprivation therapy	<input type="checkbox"/>
Not Applicable	CMS349 v1.2.000	HIV Screening	<input type="checkbox"/>

Return to Main

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Save & Continue

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